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17858 U.S.PTO
10/698839

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 04488/000M686-US0

First Inventor Robert Silman

Title SYSTEM AND METHOD FOR INVESTMENT IN A
PORTFOLIO OF ENTERTAINMENT
PRODUCTIONS

Express Mail Label No. _____

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 59]	a. <input type="checkbox"/> Computer Readable Form (CRF)
(preferred arrangement set forth below)	
- Descriptive title of the invention	
- Cross Reference to Related Applications	
- Statement Regarding Fed sponsored R & D	
- Reference to sequence listing, a table, or a computer program listing appendix	
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 15]	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
5. Oath or Declaration [Total Sheets 4]	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	11. <input type="checkbox"/> English Translation Document (if applicable)
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other: PTO/SB/08A; Declaration (signed)	

6. Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS Customer Number: 07278 OR Correspondence address below

Name	DARBY & DARBY P.C. Robert Schaffer		
Address	P.O. Box 5257		
City	New York	State	NY
Country	US	Telephone	(212) 527-7700
		Zip Code	10150-5257
		Fax	(212) 753-6237

Name (Print/Type)	Louis J. DelJuidice		Registration No. (Attorney/Agent)	47,522
Signature			Date	October 31, 2003

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U.S.P.T.O. FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 745.00)

Complete if Known

Application Number	Not Yet Assigned
Filing Date	Concurrently Herewith
First Named Inventor	Robert Silman
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	04488/000M686-US0

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number 04-0100

Deposit Account Name Darby & Darby P.C.

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code (\$)	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
Other fee (specify) _____			

SUBTOTAL (1) (\$ 385.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

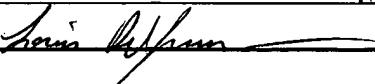
	Extra Claims	Fee from below	Fee Paid
Total Claims	60	-20** = 40 x 9.00	= 360.00
Independent Claims	2	-3*** = _____ x _____	= 0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	86	2201 43 Independent claims in excess of 3
1203	290	2203 145 Multiple dependent claim, if not paid
1204	86	2204 43 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 360.00)		

** or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY (Complete if applicable)				
Name (Print/Type)	Louis J. DelJuidice	Registration No. (Attorney/Agent)	47,522	Telephone (212) 527-7791
Signature			Date	October 31, 2003

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Dated: _____

Application No. (if known):

Attorney Docket No.: 04488/000M686-US0

Certificate of Express Mailing Under 37 CFR 1.10

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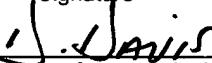
EL 982102312-US

MS Patent Application
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on October 31, 2003
Date



Signature



Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Specification (35 pages); Claims (23 pages) Abstract (1 page)
Figures 1A-8 (15 pages)
Oath or declaration (4 pages)
Information Disclosure Statement (2 pages)
PTO/SB/08A (1 page - copies of 2 documents)
Utility Patent Application Transmittal (1 page)
Application Data Sheet (2 pages)
Fee Transmittal (1 page)
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